1-1-10 to 6-30-10

11.06	l certif make balanc	City,	Addı	Nam			2010 JUL 15	PM 1:00 VED
Signature of Committee Treasurer or Candidate	I certify that the above named committee or candidate did not receive contributions or other income make disbursements, or incur obligations during the period covered by this report and that the cash balance remains the same as previously reported. This report fulfills filing requirements under Sec. 11.06(9), Stats.	City, State, Zip Milwaukee	Address (number and street)	Name of Candidate or Committee (in full) AATH LEEN AR	;	Spring Fall Special Pre-Election	Short Form EB-2a State Elections Board	
Date	did not receive contributions or other income, eriod covered by this report and that the cash is report fulfills filing requirements under Sec.	19 0/1881 e M/ 5322/	S 19 Stree	LEEN !		Continuing Continuing	W.S.E.B. ID Number	
Daytime Phone			let	ARCISZEWSK		Continuing Report due Jan. 31,	D Number	

EB-2a (Rev. 9/95) (Reformatted 3/98) (Y2K 9/99)